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CONFIRMATION NO. 6412

SERIAL NUMBER 10763,132	FILING DATE 01/22/2004 RULE	CLASS 221	GROUP ART UNIT 3651	ATTORNEY DOCKET NO. 3088.2.1
APPLICANTS Brad Wood, Wellsville, UT;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 04/27/2004				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>TW</i> Initials	STATE OR COUNTRY UT	SHEETS DRAWING 4	TOTAL CLAIMS 18
			INDEPENDENT CLAIMS 3	
ADDRESS Starkweather & Associates 9035 S 1300 E Suite 200 Sandy , UT 84094				
TITLE Apparatus, system, and method for a medication access control device				
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____	